

CANNON BUILDING 861 SILVER LAKE BLVD., SUITE 203 DOVER, DELAWARE 19904-2467

#### STATE OF DELAWARE

BOARD OF NURSING

BOARD OF NURSING

Limited Lay Administration of Medications Committee

FAX: (302) 739-2711

WEBSITE: DPR.DELAWARE.GOV

EMAIL: customerservice.dpr@state.de.us

TELEPHONE: (302) 744-4500

## **LLAM COMMITTEE MINUTES**

The LLAM Committee held a meeting on June 8, 2016 at 4:30 P.M. in Conference Room A, Cannon Building, 861 Silver Lake Blvd, Dover, Delaware.

**PRESENT:** Mary Peterson, Sandra Robinson, Maxine Travis, Pam Tyranski, Yrene Waldron

**ABSENT:** Sarah Carmody, Vickie Cox, Alicia Kluger, Agnes Richardson,

GUESTS: Kim Blunt, RN, NHA/DHCFA; Lisa D. Graves, RN, BSN; Lynda Lord, MHA, RN, Betty

Gail Timm, DSCYF

PRESIDING: Pam Tyranski

**STAFF:** Peggy Mack, Executive Director, Delaware Board of Nursing

**1.0 CALL TO ORDER:** Ms. Tyranski called the meeting to order at 4:40 pm.

**2.0 REVIEW OF MINUTES:** Minutes from the November 23, 2015 LLAM meeting were reviewed. Ms. Peterson made a motion to approve the minutes, seconded by Ms. Waldron; the motion carried unanimously, with Ms. Robinson recused.

### 3.0 NEW BUSINESS:

## 3.1 Agencies' Questions

## 3.1.1. Program Roll out

3.1.1.1. Testing process (quizzes)

Committee members discussed the roll out process to facilities. The LLAM quiz was reviewed on page 49 and noted that questions 50 and 51 reflected mis-sequenced numbering and needed to be reformatted; the correction will be made.

#### 3. 1.2. Medications

### 3.1.2.1 Crushing of medications

The members discussed facilities' requests regarding the crushing of medicines. The Institute of Safe Medication Practices provides a list which pharmacies use noting which medicines can be crushed. A chart can also be provided by pharmacies for their facilities. A physician order is always required for a medication and if the medication can be crushed. Ms. Peterson made a motion, seconded by Ms. Robinson, to permit the crushing of medications by UAPs, as long as there is an order for crushing by a licensed professional with prescribing authority and if the pharmacy approved the medication to be crushed. The motion carried unanimously.

# LLAM Committee Minutes June 8, 2016

#### 3.1.2.2. PRNs

The committee discussed that clients / patients have different communication methods which may impact medications upon request (prns). It was agreed that non-verbal communications are acceptable methods and that they may communicate a need for a prn. The LLAM curriculum does not specifically state that a prn request has to be made verbally, and some entities were interpreting the term "request" literally. It was noted that prns are reviewed more frequently due to the availability of electronic records, but at a minimum they are reviewed on a monthly basis, and that care plans require notes regarding prn effectiveness.

## 3.1.2.3. Standing Meds

Standing medications with parameters (such as blood pressure medications) were discussed in context to the scope of nursing practice and nursing judgement. It was observed that nurses are not always available in each setting. The LLAM Committee agreed that medications that require parameters also are medications that require nursing judgment; UAPs cannot administer medications that require parameters and such, nursing judgement. A motion was made by Ms. Peterson and seconded by Ms. Waldron that the Deputy Attorney General would be consulted for confirmation and if needed, the Board of Nursing's Practice and Education Committee; the motion passed unanimously.

## 4.0 OTHER BUSINESS before the committee (for discussion only):

<u>Annual Report</u> - The LLAM annual report is due on August 1, 2016. The reporting period for this first report covers from January 1 to June 30, 2016. Subsequent reports will follow the state's fiscal year, July 1 to June 30<sup>th</sup>. The Committee members will review the LLAM annual reports.

<u>Controlled Substances</u> – The LLAM Committee confirmed that UAPs who have been LLAM trained can administer controlled substances, but any facility or setting may determine additional restrictions. A program module can be stricter than the LLAM Core Module.

## **PUBLIC COMMENT-**

Ms. Graves and Ms. Lord discussed the need for their population to receive medications that may have parameters. A question was asked regarding assessment. "Near misses" – urgent care visits due to UAPs medication errors - were discussed, and questions were raised regarding how quality and safety oversight was tracked. It was noted that this level of specificity is not tracked. The Committee recommended that review of all ER / hospitalization incidents be completed, and a root cause analysis conducted, as part of a quality management program to track UAPs. A systematic perspective is needed in the Community settings in order for more expanded scope to be considered for any sites. It was noted that when reports were received by the BON under AWSAM, zero errors were consistently reported, which is not consistent with national UAP measurements, nor consistent with RN and LPN medication error rates. Therefore, the Committee recommended better oversight and quality improvement measure be initiated to document safety, before expanded UAP scope could be considered.

The DSAMH facility, Gateway and others are potentially doing AWSAM, without statutory authority to do so was discussed, as reports on their instructors have been received by the BON.

LLAM Committee Minutes June 8, 2016

Ms. Timm, DSCYF/OCCL, discussed the challenges of finding a LLAM qualified trainer. The Committee offered suggestions and shared more than a year planning history to implement in all sites.

**NEXT MEETING-** To be determined

ADJOURNMENT- The meeting was adjourned at 6:50 pm

Respectfully submitted,

Peggy Mack, PhD, APRN, PMHCNS

**Executive Director** 

**Delaware Board of Nursing**